

# Journey to Excellence

## Service Project Reporting Form

Unit Type: Pack / Troop / Crew / Ship / Team / Post

Unit Number: \_\_\_\_\_

Reporting Leader's Name: \_\_\_\_\_

Phone Number/Email: \_\_\_\_\_

Type of Service Project (Circle One):

Food

- Food Collection
- Meal Delivery
- Serving Food

Shelter

- Home Building
- Home Repair/Maintenance
- Personal Care Collection
- Blanket Collection
- School Supply Collection
- Book/Magazine Drive

Healthy Living

- Blood Drive
- Fun Run/Walk/Hike/Cycle
- Bike Safety Event
- Child Fingerprinting
- Health Fair/Fitness Expo
- CPR Training
- Tree Planting
- Litter Cleanup/Beautification

Other Services

- Disaster Relief
- Conservation
- Military Support
- National Park Resource Stewardship
- Other

Date of Service Project: \_\_\_\_\_

Number of youth members participating in the project: \_\_\_\_\_

Number of youth who are not members participating in the project: \_\_\_\_\_

Number of adult leaders participating in the project: \_\_\_\_\_

Number of other adults participating in the project: \_\_\_\_\_

Total unit hours – including members and non-members: \_\_\_\_\_

(Example: 10 people worked 2 hours = 20 total unit hours)

Which of the following organization(s) did you partner with on the project?

- |                                 |                                |                            |
|---------------------------------|--------------------------------|----------------------------|
| • American Red Cross            | • Boy Scout Camp               | • Order of the Arrow Lodge |
| • Habitat for Humanity          | • County                       | • Lone Scout               |
| • Salvation Army                | • Church                       | • Service Organization     |
| • U.S. Department of Health     | • Synagogue                    | • Housing Authority        |
| • Local Food Bank/Pantry        | • Mosque                       | • America Supports You     |
| • Local Shelter for the Abused  | • Other Religious Organization | • U.S. Forest Service      |
| • Local Blood Bank              | • School                       | • National Parks Service   |
| • Meals on Wheels               | • Retirement Center            | • Other                    |
| • Local Medical Center/Hospital | • Goodwill Industries          | • No Partner               |
| • City                          | • Civic Organizations          |                            |

List any local organizations that you partnered with on this project: \_\_\_\_\_

Briefly tell us about your project: \_\_\_\_\_



JOURNEY TO EXCELLENCE

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